

I hereby certify that this correspondence is being sent by facsimile transmission in accordance with § 1.6(d) addressed to Mail Stop Petition, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Date: March 11, 2004

By:

Kay L. Gaviglio

#10

PATENT
Docket No. GC712



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of)
Shetty et al.)
Serial No.: 10/026,288)
Filed: December 19, 2001)
For: A Process for Hydrolyzing Starch)
Without pH Adjustment)

Group Art Unit: 1651

Examiner: Prats, Francisco Chandler

RECEIVED

MAR 17 2004

OFFICE OF PETITIONS

PETITION FOR EXTENSION OF TIME

Mail Stop Petitions
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The following extension of time is requested to respond to the Office Action dated May 29, 2003.

one month to _____; the extension fee is \$110.00.

two months to _____; the extension fee is \$410.00.

three months to November 29, 2003; the extension fee is \$930.00.

four months to _____; the extension fee is \$1,450.00.

five months to _____; the extension fee is \$1,970.00.

The extended time for response does not exceed the statutory period.

☐ The shortened statutory period has been reset by an Advisory Action dated _____.

☒ Charge \$930.00 to Deposit Account No. 07-1048.

03/16/2004 AHONDAF1 00000071 071048 10026288

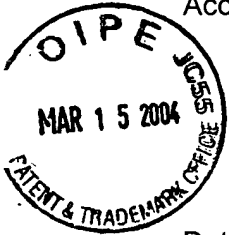
02 FC:1253 950.00 DA

03/24/2004 AKELLY

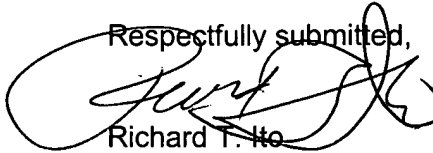
03/24/2004 00000071 071048 10026288

950.00 CR

The Commissioner is hereby authorized to charge any fees under 37 C.F.R.
 §§ 1.16 and 1.17 that may be required by this paper, and to credit any overpayment, to Deposit
 Account No. 07-1048 (Docket No. GC695). A duplicate of this paper is enclosed.



Date: March 11, 2004

Respectfully submitted,

Richard T. Ito
Registration No. 32,242

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Genencor International, Inc.
925 Page Mill Road
Palo Alto, CA 94304-1013
Tel: (650) 846-4020
Fax: (650) 845-6504

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>3-19-04</u>		2 Serial/Patent # <u>101026, 288</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
X	Extension of Time	#10	3-15-04	\$ 950.							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
7 TOTAL AMOUNT OF REFUND			\$ 950.								
8 TO BE REFUNDED BY:											
10 REASON:		Treasury Check									
	Overpayment	Credit Deposit A/C #:									
	Duplicate Payment	9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"><tr><td>0</td><td>7</td><td>--</td><td>1</td><td>0</td><td>4</td><td>8</td></tr></table>			0	7	--	1	0	4	8
0	7	--	1	0	4	8					
	No Fee Due (Explanation):										
<u>Extension filed after abandonment of appl.</u>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>Latrice Bond</u>		TITLE: <u>Rua Spec.</u>									
SIGNATURE: <u>Latrice Bond</u>		PHONE: <u>3086911</u>									
OFFICE: <u>Office of Petitions</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u>[Signature]</u>		DATE: <u>3/24/04</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B